

Investigating the Efficiency of Indian Welfare Schemes an Empirical Analysis

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Abstract

India as a nation, considering its history of colonialism, exploitation, and demography, has always had to perform (with varying degrees) at a sub-optimal level in economic terms as not many sections of the population are able enough to even have proper access to important indicators of development such as health & employment. To address this inequity and equity issue, the economic policies and schemes devised by nations to empower or uplift groups of interest are evident examples of the idea of what is known as the formulation of an inclusive growth model. Developing nations such as that of India are implementing stimulative schemes to guarantee equal and affordable access so as to "push these groups of specific interests" in order to optimally perform on the pathway of what is known as "sustainable development." Our research aims to investigate the "thrust" that has been put forth by the Government of India by analyzing welfare schemes that explicitly focus on health and employment.

We have primarily used secondary data sources for MGNREGA and Ayushman Bharat beneficiaries' data. Other than this, sources such as the Centre for Policy Research (CPR), and many other secondary sources also have been taken into consideration. After collecting the data, we will analyze various indicators involved using statistical evaluation to generate a set of estimated results for the comparison as stated in the objective.

Last but not the least, this paper tries to engage further for qualitative discussions to form a descriptive cum quantitative analysis to possibly pose limitations from the data, research gaps, questions, and probable solutions to flesh out a plethora of important discussions on the general and the broader context of growth and development.

Keywords: *welfare, India, labor, employment, health, budget, expenditure, COVID, MGNREGA, Ayushman Bharat*

Table of Contents

- Objective
- Introduction
- Literature Review
- Research Methodology
- Research Questions
- Analysis and Findings
 - MGNREGA
 - Ayushman Bharat Yojana
- Conclusion and Future Prospects
- Abbreviation Table
- References

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Objective

The objective of this research study is to perform a comparative analysis on part of the government with regard to welfare policies directed towards two of the most crucial pillars for a country in the pathway of sustainable development, i.e., health and employment, on a year-by-year basis taking into account the changes in the political landscape, wherever needed.

Introduction

The persuasion for the optimal condition in every space of life led to the emergence of economics as a distinctly significant field of study. The idea on which the core of economic models thrives leads us on a continuous and dynamic discourse towards a "more just society".

Economic policies and schemes devised by nations to empower or uplift "groups of interest" are evident examples of the idea of what is known as the formulation of an "inclusive growth model." A nation or a society can only prosper to the absolute when each of its elements are.

Welfare schemes or policies in a country are undertaken to provide benefits to the public in terms of minimal & necessary needs when the economy itself is not able to generate enough for the public, be it under normal circumstances or under circumstances of special interest such as that of natural turmoil, recession or most recently, the lockdown.

The welfare schemes selected for this particular study are MGNREGS (Mahatma Gandhi National Rural Employment Guarantee scheme), and AYUSHMAN BHARAT YOJANA (the National Health Protection scheme). By analyzing the impact and reach these policies have generated over the years under different political regimes, we attempt to understand the efficacies of these policies, merging them with the broader concept of sustainable growth for a developing nation like India.

Literature Review

Since the implementation of these welfare policies, several efforts have been made to discern the extent of the impact that these policies have made in the target vicinity of their objectives. Building upon the insights from these sources, this paper will undertake approaches to further the growing literature on welfare schemes from a governmental effort perspective targeted towards health and employment in specific and in general terms as well.

Taylor and Francis Group (2014) finds that MGNREGA as a scheme is more inclusive of the vulnerable sections of society, e.g., scheduled tribes, scheduled castes, and women as well. It also highlights that the village-level differences in effective implementation led to the reduction of hunger and poverty. It also appreciates the positive impact the scheme has made on the increased bargaining power of rural laborers in the agricultural sector, resulting in higher wage rates, better work environment, and less exploitation.

Rhonda Breikreuz et al. (2017) in contrast points out that despite offering basic employment for marginalized groups, the MGNREGA scheme was not able to provide substantial help to the most vulnerable. Better wages compared to market prices w.r.t. regions, more opportunities for work, better implementation, and greater recognition of the caregiving responsibilities of women is required for this policy to fully meet its goals.

Rob Jenkins, James Manor (2017) in their book on NREGA and the politics surrounding MGNREGA found it implicated in a wide range of key national policy debates with adherence to different political regimes : from public finance to internal security to rural development, as well as changes in the political calculus of state-level leaders, local political dynamics, in social interactions and perceptions of social status

Vijayaprasad Gopichandran(2019) emphasizes the ethical responsibility of the government to ensure a robust and effective healthcare system, and in its study of the Ayushman Bharat Yojana, criticizes that the current provisioning of the scheme does not effectively implicate it.

Shailender Hooda (2020) in his study of the Ayushman Bharat Yojana emphasizes the need to establish agencies like the National Health Authority (NHA) at the central level, but nodal and regulatory agencies across states as well. Also, Clear policy guidelines are required for addressing concentration, to restrict the monopoly power of large corporate hospitals, and proper regulatory guidelines are required for insurers and private providers.

Jaison Joseph et al.(2021) in their study of Ayushman Bharat Pradhan Matri Jan Arogya Yojana finds that out of the total facilities empanelled under the scheme in 2020, more than half were in the public sector, while 40% of the facilities were private for profit, and 4% were private not for profit entities. Thus, pointing towards the gradual publicization of resources under this scheme.

The insights from this aforementioned literature will now be used in analyzing the impact these policies have had empirically thereby, their effectiveness from the perspective of governmental efforts in terms of financial allocation, and reach over the years.

Research Methodology

Our research paper follows a quantitative cum qualitative approach with the latter given more importance following an empirically comparative study of the budgetary allocations on part of the Government to the respective policies on a year-by-year basis since their inception. A study on real estimates of the values has also been made till 2017 for MGNREGA for a fairer comparison. Further statistics include the reach generated by these policies (parameters varied) under the respective political regimes based on various governmental & institutional resources such as the Center for Policy Research (CPR), The Journal of Economic and Political Weekly, legitimate news stations like the Times of India (TOI), Economic Times (ET), News 18 and many others. Underpinning the probable causation of the trends generated from the collective evidence, plausible conclusive statements have been furnished with an attempt to further the literature on the efficacies of these policies in their lifetime and their importance under the context of sustainable growth in general.

Research Questions

1. What are the budgetary allocations made for Ayushman Bharat Yojana and MGNREGA in the fiscal years since their implementation?
2. How is the actual release of funds different from the planned allocated funds for each initiative under the Ayushman Bharat and MGNREGA?

Based on this, we address the following questions:

3. How much has the financing of the welfare policies grown in real terms since the inception of the policies under two political regimes (for MGNREGA) and effective allocation under the same political regime (for Ayushman Bharat Yojana)?
4. Are the emerging trends anywhere close to achieving the two main goals set by the government- Universal Health Coverage and Employment For All?
5. And, what are the untapped future prospects required to encourage and enhance the emergence of India as a sustainably developed country?

Analysis & Findings

The first section discusses the governmental effort put on part of MGNREGA under two different political regimes, namely the United Progressive Alliance (UPA) & National Democratic Alliance (NDA) and the second section focuses entirely on Ayushman Bharat Yojana under the helm of NDA. In this way, the target-specific analysis of the two policies at par with the objective can be achieved as we discerned.

The most general notion about these welfare policies as such is that they are initiated with a great amount of fanfare, more or less for the purpose of political apprehension, thereby exacting the chance of emerging victorious in the elections. But gradually, the aura and the hype that these policies generate along with the thrust put on them by the existing government fizzles out in the course of time. With this study focusing on factors such as allocation amounts, both budgetary and revised with actual expenditures and the no. of beneficiaries generated tries to explore the changes in the thrust put forth on them on a successive year-by-year basis.

MGNREGA:

MGNREGA stands for Mahatma Gandhi National Rural Employment Guarantee Act. It was initiated under the UPA-I Government as a scheme specifically centered towards generating employment among the financially weaker sections of the society. It has always been in the limelight both in National as well as International Policy Debates. Held often as the flagship scheme of the UPA government for its direct approach, this policy has been a subject of immense importance under the NDA government as well.

The scheme was notified in the parliament on 7th September, 2005. The mandate of the work is to provide 100 days of guaranteed wage employment in a financial year to every rural household whose adult members volunteered to do unskilled manual work. After being notified, the scheme was enacted in 200 Rural Districts during the first phase of implementation, with effect from 2006. By 2008, the scheme covered all of the country except where there were 100% urban population.

The first table discusses the allocations made on nominal terms for the UPA government and then putting forth a qualitative analysis on real terms of the values allocated (in terms of 2004 prices) we compare the growth in allocation in real terms and further we do the same for the NDA budget as well. The real estimates for NDA tenure have been put forth till 2017 only. To note, this approach takes into account certain specific data from esteemed sources to facilitate the study, other than the ministerial source as summarized in the following tables.

UPA Expenditure Table:

Fiscal Year	Total Budget			Ministry of Rural Development allocation			MGNREGA		
	Estimate	Revised	Actual	Estimated	Revised	Actual	Estimate	Revised	Actual
2006-07	563991	581637		24047.56	24297.72		11300	11300	8824
2007-08	680521	709373		27522.86	28523.50	28796.43	12300	12000	12661.22
2008-09	750884	900953		31524	56883.54	56881.89	16000	30000.19	27250
2009-10	1020838	1021547		62706.95	62201.40	56640.50	39100	39100	33539.38
2010-11	1108749	1216576		66137.86	76378.15	72111.21	40100	40100	35841.49
2011-12	1257729	1318720		74143	67183.32	64263.45	40000	31000	29212.92
2012-13	1490925	1430825		73221.82	52044.83	50206.62	33000	29387	30274.72
2013-14	1665297	1590434	159446.77	74477.65	59355.65	58666.28	33000	33000	32992.83

** (all figures are in crores and in nominal terms)

Source: Ministerial Budget

On the nominal forefront of the government's contribution, we can observe that in the first few years, it was a kind of an experimental step in the welfare sector, so the ministerial allocations in 2006-07 till 2008-09, compared with other fiscal years put forth are lesser.

Starting from the year 2008, when the policy started its whole India coverage, we observed a hike in the allocations made and interestingly, owing to the worker demand and plausible extension of coverage during that period, the revised estimates were hiked from planned expenditures being Rs.16000 crores to revised being Rs. 30000.19 crores. The increment is also observed in the actual expenditures proportionate to the rise in other expenditures.

From 2009-10, the highest allocation for the policy under the NDA term was made for the policy in each of the fiscal years, with the planned and revised estimates being the same during this period. During these two periods, coinciding with the second term of the UPA government led by Indian National Congress, MGNREGA was raised up as a forbearer scheme of the government. With regard to populist stances in part of political parties. The positive impact generated in terms of work creation and household reach boosted the reputation in public, with critiques of the stance focusing on the difference between what was allocated and the actual expenditure, emphasizing on a more stringent and thorough utilization of funds, as we will see in the next para.

Sort of an anomaly in the increasing trend can be noticed for the first time when in the fiscal year 2011-12, the planned expenditure was reduced (to 40000 crores) compared to the previous year and also, the revised estimates were drastically dropped to 31000 crores. The major drop in both planned as well as revised estimate was observed in the fiscal year 2012-13, to Rs. 33000 crores and Rs. 29387 Crores respectively. The reasoning behind the anomaly in the trend has often been cited as the massive underutilization of funds with regard to effective implementation of the policies, as per the statements of the ministry, evident from the trend of actual expenditures compared with planned and revised estimates since the inception of the policy.

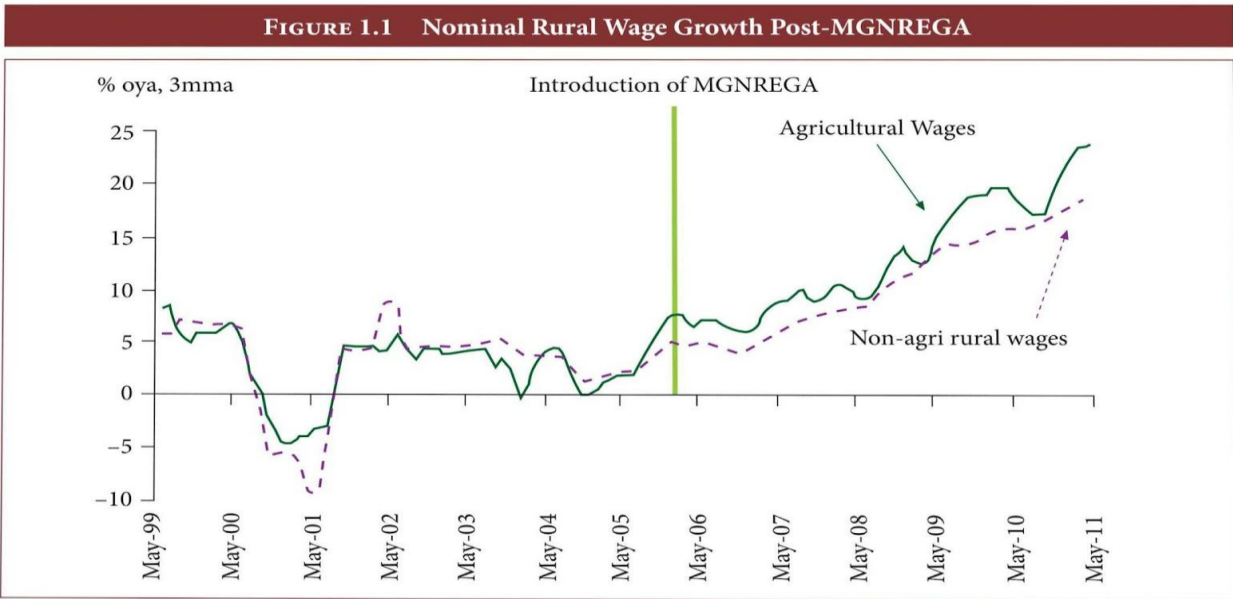
The last term of the UPA government saw the planned as well as revised utilization limited only to Rs.33000 Crores, similar to that of the previous year. The difference being an improved performance with respect to utilization of allocated funds as can be seen from the actual expenditure allocation during that time. This increment in utilization proportional to planned and revised estimates can be accounted for the rising political thrift during the parliamentary elections of 2014 and previous critiques. Despite this, the government in general during the last period was not able to garner the hype it had generated earlier.

Apart from the budgetary parameters, another important indicator taken in account for this study has been the household reach generated on a successive year-by-year basis. From the below statistics :

2006-07 : No. of households provided employment: 2.1 Crores.
 2007-08 : No. of Households provided employment : 3.4 Crores.
 2008-09 : No. of Households provided employment : 4.5 Crores
 2009-10 : No. of Households provided employment : 5.3 Crores
 2010-11 : No. of Households provided employment : 5.5 Crores
 2011-12 : No. of Households provided employment : 5 Crores
 2012-13 : No. of Households provided employment : 4.9 Crores.
 2013-14 : No. of Households provided employment : 4.7 Crores.

As the statistics shows, the households being provided employment and therefore the work reach generated, we can observe an increasing trend in the reach till 2010-11. Though the data being not up to the mark compared with a fairly large chunk of the population living below the poverty line, inaugural implementation of the policy saw a leverage in the reach in the first few years. After that it seemed to have reached a threshold of coverage, whatever may be the reasons both infrastructurally & implementarily. From 2011-12, coinciding with the critique of underutilizing funds & thereafter a drop in allocation, household reach generated a drop drastically as well. Other reasons causing this fall can include lack of generation of enough work in contrast to the demand, poor supervision and lack diversification needed for the workforce as well.

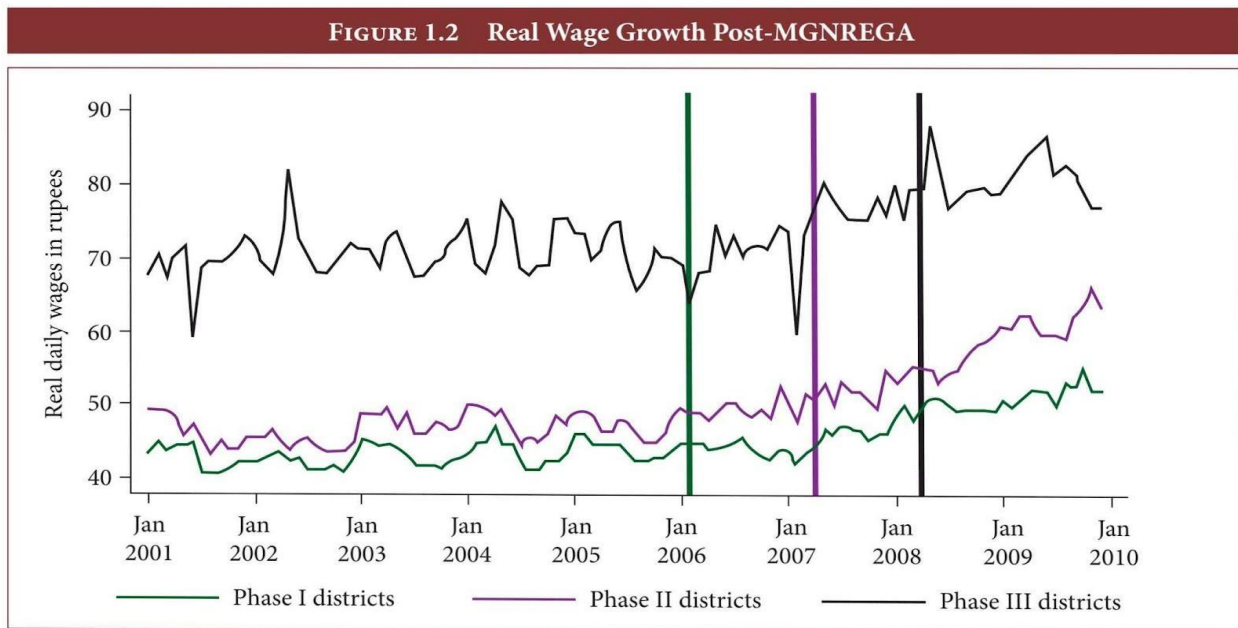
Another chunk of the policy effectiveness on governmental front includes the wage rates, the selective representative trends associated till 2010-11 are captured in the following graphs:



Source: MGNREGA Sameeksha

The graph comparing the nominal wage growth both in terms of agri as well as non-agri rural wages trend for pre and post MGNREGA on a year-by-year basis puts forth an increasing trend in general with some ups and downs in between coinciding with the aforementioned dissection of budgetary allocations of the data collected.

The following graph of real rural wage growth trend pre and post MGNREGA dissects the implementation of the policy phase wise and encaptures the trend therefore:



Source: MGNREGA Sameeksha

In contrast to the Nominal dissection, despite observing a more or less increasing (mostly decreasing during the first few years) trend in real wage growth post MGNREGA for phase 1 and phase 2 districts, the fluctuations have been greater for the phase 3 districts with dips in the period of 2010-11, coinciding again with the aforementioned analysis.

Despite being hailed as a success and mostly so, since it was a first of its kind direct employment generation programme, the statistics of declining household reach, real rural wage growth as well as reduction in the budgetary allocation points out the lack of “required” efforts put forth to meet the objectives laid from a long-term perspective. But nonetheless, it initiated a set of direct efforts on part of the government subjected towards target specific indices for a developing nation; in this case, employment.

After analyzing these parameters for the UPA government, we will now put a more or less same analysis structure for the performance of the NDA Government. Starting from mid-2014-15, the government laid its first impression for the flagship scheme of UPA in its budget. The following table summarizes the value of the same parameters as the UPA, only this time, for NDA. (The presumptive statements apply for this section as well)

NDA Expenditure Table:

Fiscal Year	Total Budget			Ministry of Rural Development allocation			MGNREGA		
	Estimated	Revised	Actual	Estimated	Revised	Actual	Estimated	Revised	Actual
2014-15	1794892	1681158	1663673.05	80093	68204.15	67310.61	34000	33000	32976.71
2015-16	177477.04	1785391.02	1449152.98	71695.08	77000.35	77369.18	34699	36967.00	37335.69
2016-17	1978060.45	2014406.95	1975193.71	86055.80	95960.03	95152.52	38500	48220.26	48215.33
2017-18	2146734.78	2217750.06	2141973.06	105447.88	109042.45	108559.63	48000	55167.06	55166.06
2018-19	2422135.30	2457235.02	2315112.61	112403.92	112403.92	11903.37	55000	61830.09	61815.09
2019-20	2786349.45	2698552.14	2686329.95	117647.19	122649.00	122098.19	60000	71001.81	71686.70
2020-21	3042230.09	3450305.27	3509836.38	120147.19	197376.53	196416.71	61500	111500	111169.53
2021-22	3483235.63	376999.73		131519.08	153558.07		80000	98000	
2022-23	3944908.67			138203.63			73000		

(** all figures are in nominal terms and in crores)

Source : Ministerial Budget

The aforementioned graph will help us observe the trend on part of the Government for MGNREGA under the regime of NDA led by the Bhartiya Janata Party. As we can observe, during the first fiscal term of the government (not taking into account the mid-term budget of 2014), the statistics of allocation of funds to MGNREGA doesn't have much of a difference from the final term of UPA. Except for Planned estimates being raised to Rs. 34000 Crores, the revised and the actual expenditures more or less stands to be the same for the policy. This laid-back handling of a previous government's flagship scheme can be attributed both to political differences and again, an experiment to first get a hold of the approaches required.

From 2015-16 to 2016-17, we see an increase in the funds allocated in planned expenditures, with a drastic increase in the revised estimates from that of planned for 2016-17 & the actual expenditures being mostly realized to what had been planned & revised. The highest allocation to the scheme in its lifetime (till then) was seen in the revised estimates of 2016-17. The drastic raise in revised estimates can be attributed to the increasing work demand addressed by the state governments. The awareness of these programmes, now with a digital wave in parallel helped reach the targeted sections of the society more.

Apart from these, the notes to be made of the fact that, the NDA government tried to enhance the effectiveness of the scheme with a touch of innovation. The govt. introduced Geo tagging of the assets created under MGNREGA in the year 2016. Through Geo tagging of the assets created under NREGA, not only a system of monitoring & processing was devised but it also opened a key source to check for requirements of further development of already existing assets. (Say, leakages, servicing etc.)

Since then, from 2017-18 onwards, the trend of allocation, in terms of planned, revised, and actual expenditures have followed the increasing trajectory, with exception in the revised estimates in the fiscal year 2021-22, compared to its previous year. And it can't be considered an anomaly, since the during the previous year, the covid -19 pandemic gulfed the whole economy in a luo, therefore a drastic raise of funds in the revised estimates of 2020-21 was made approximately to Rs. 11 lakh crores, as can be seen from the table.

This step evidently helped generate and sustain employment to its minimum (though not sufficient enough) during a period of turmoil. In the following fiscal period, the scheme was allocated a lesser sum in the planned expenditures compared with the revised estimates of previous year, in an attempt to make up for the drastic rise in expenditure in the previous period. This step caused the scheme to run out of funds and turn its balance sheet negative by October 2021. So, in the revised estimates, the sum was raised to Rs. 98000 Crores. (Less than the previous year). The more stringent impacts of this for the period 2021-22 was released in the form of delayed wage payments, artificial suppression of demand (mostly political in nature) and state government's coffers to meet their costs. For the next period of 2022-23, we can observe the policy being allocated a lesser amount of Rs.73000 crores, notably without a mention from the finance minister during the budgetary speech, and this has been met with several criticisms.

Though the figures may seem generously improved from the tenure of the UPA government, critics point out the fact that a certain level of growth in both nominal value and governmental efficiency in terms of policy implementation is always possible. Pointing out the state of employment status of the country not being considered great, the real impact of the policy, under the NDA regime, despite experiencing a positive jump hasn't been sufficient enough, coinciding with the critique of the UPA regime.

As a special case with the NDA regime, we can track the efficacy of the scheme during the period of pandemic. The amount of work generated compared with the work demand in this period will help specifically analyze the target specific reach of this scheme. Before the trend analysis of work demand - generated during pandemic, we first have gathered statistics for household reach generated through the scheme over the years, as can be seen:

2014-15: No. of households generated employment: 4.1 Crores

2015-16: No. of households generated employment: 4.4 Crores

2016-17: No. of households generated employment: 4.8 Crores

2017-18: No. of households generated employment: 4.6 Crores

2018-19: No. of households generated employment: 5.27 Crores

2019-20: No. of households generated employment: 5.48 Crores

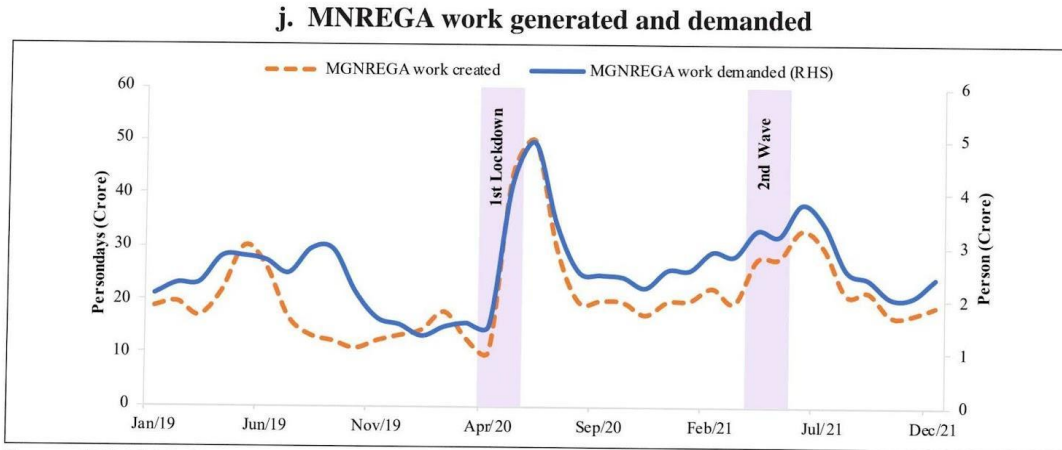
2020-21: No. of households generated employment: 13.62 Crores (as per govt. statement)

2021-22: No. of households generated employment: 7.26 Crores

The trend under this parameter is mostly increasing in the case of the NDA regime as well. But the increase hasn't been greatly improved from the performance of the UPA regime, with the exception during the

period of 2020-21, owing to the boost in budgetary allocation. The next year the extent of reach fell to 7.26 Crores. Mostly the trend coincides with the analysis of the budgetary allocation for NDA.

The following graph charts out the trend of work demand - generated during the covid -19 period:



Source: NREGASoft

The trend chart shows that with cases of exceptions (such as that of the phase between Apr. 20 and Sep. 20) points towards the work generated being lesser (though not by large) than that of the work demanded. And remarkably, the amount of work generated coincides with the amount of work demanded during the phase of Apr. 20 till mid of August 20. Otherwise, the trend of declining demand for work points towards the lack of proper job creation, the labor migration and phase of turmoil engulfing the country in general.

Relevant Data associated with MGNREGA adjusted to real values from 2007-08 till 2017-18 (2004 prices as per Labor Bureau, Shimla):

UPA Expenditure Figures:

2007-08 :

Budget outlay for the scheme: to Rs. 10413.19 Crores

Revised Estimates : Rs. 10159 Crores

Actual Expenditure : Rs. 10719 Crores

2008-09:

Budget outlay for the scheme: Rs. 12434.93 Crores

Revised Estimates : Rs. 23315.64 Crores

Actual Expenditure : Rs. 21178.24 Crores

2009-10:

Budget outlay for the scheme: Rs. 26888.94 Crores

Revised Estimates : Rs. 26888.94 Crores

Actual Expenditure : Rs. 23064.92 Crores

2010-11:

Budget outlay for the scheme: Rs. 25646.28 Crores

Revised Estimates : Rs. 25646.28 Crores

Actual Expenditure : Rs. 22922.71 Crores

2011-12:

Budget outlay for the scheme: Rs. 23368.40 Crores

Revised Estimates : Rs. 18110.51 Crores

Actual Expenditure : Rs. 17066.48 Crores

2012-13:

Budget outlay for the scheme: to Rs. 17566.33 Crores

Revised Estimates : Rs. 15643.08 Crores

Actual Expenditure : Rs. 16115.62 Crores

2013-14:

Budget outlay for the scheme: to Rs. 15961.26 Crores

Revised Estimates : Rs. 15961.26 Crores

Actual Expenditure : Rs. 15957.79 Crores

NDA expenditure figures:

2014-15:

Budget outlay for the scheme: to Rs. 15702.49 Crores

Revised Estimates : Rs. 15240.66 Crores

Actual Expenditure : Rs. 17359.58 crores

2015-16:

Budget outlay for the scheme: Rs. 15200.02 Crores

Revised Estimates : Rs. 16193.52 Crores

Actual Expenditure : Rs. 16355.03 Crores

2016-17:

Budget outlay for the scheme: to Rs. 20156.64 Crores

Revised Estimates : Rs. 20156.64 Crores

Actual Expenditure : Rs. 20154.58 Crores

2017-18:

Budget outlay for the scheme: to Rs. 22617.01 Crores

Revised Estimates: Rs. 27922.39 Crores

Actual Expenditure: Rs. 22616.60 Crores

Comments

As we can observe, the values in nominal terms provided us with very inflated figures, and the trend in real terms can be analyzed from the above-mentioned figures. The general trend of the figures goes in parallel with that of the nominal terms. But, the key facet to look for is whether the values allocated have met up with the rising prices of everything or not. And that connecting dot, seems to be missing in both the governmental regimes. Therefore, it has always been the point of the critics of the policies that the accretion of funds allocated have not been sufficient enough, to make a leap towards the idea of "Employment For All". Compared with the initial figures of the UPA government in real terms, there hasn't been a significantly impactful difference in the amounts financed (only gradually, the increase has reached a good level since the policies first implemented) under the NDA government until very recently, during the lockdown. And apart from these, the corrupt practices at state and local level also affects the proper utilization of funds in general, along with the aforementioned points regarding affable job creation. Much to be done in this regard, as per our study suggests.

Ayushman Bharat Yojana

Ayushman Bharat or "Healthy India" is a national initiative launched by Prime Minister Narendra Modi as part of National Health Policy 2017, in order to achieve the vision of Universal Health Coverage (UHC). This initiative has been designed along the lines as to meet SDG 3.8 and its underlining commitment, which is "*leave no one behind*". It aims to undertake path-breaking interventions to holistically address health (covering prevention, promotion, and ambulatory care), at the primary, secondary, and tertiary levels.

As per the latest norm, the program consists of three initiatives:

(1) **The Pradhan Mantri Jan Arogya Yojana (PMJAY)- Launched on 23 September 2018**, PMJAY is a health insurance scheme aimed at providing access to quality inpatient secondary and tertiary care to poor and vulnerable families and reducing out-of-pocket expenditures arising out of catastrophic health episodes.

(2) **The establishment of 1.5 lakh Health and Wellness Centres (HWCs)** are to provide preventive, promotive, rehabilitative, and curative care for an expanded range of services encompassing reproductive and child health services, communicable diseases, non-communicable diseases, palliative care, and elderly care, oral health, ear nose, and throat (ENT) care, and basic emergency care.

3) The Prime Minister launched another initiative called the **PM Ayushman Bharat Health Infrastructure Mission (PMABHIM)** in October 2021 as a major boost to enhancing healthcare infrastructure in the country. It is the biggest all-India scheme to develop and improve India's long-term public healthcare infrastructure.

Ayushman Bharat Table:

Fiscal Year	Allocation (IN CRORES)	Total Budget	Ministry of Health and Family Welfare	AYUSHMAN BHARAT		
				PMJAY	HWCs	PMABHIM (64180 over 6 yrs)
2018-19	Budget Estimate	2442213	54600.00	nil- only RSBY 2000	nil	nil
	Revised Estimates	2457235.02	56045.23	2400	1200	nil
	Actual Expenditure	2315112.61	54681.83	1997.92 (1998)	1191.5 (1192)	nil
2019-20	Budget Estimate	2786349.45	64559.12	6400	1600	nil
	Revised Estimates	2698552.14	64509.12	3200	1600	nil
	Actual Expenditure	2686329.95	64257.79	3200	1649	nil
2020-21	Budget Estimate	3042230.09	67111.80	6400	1600	nil
	Revised Estimates	3450305.27	82928.30	3100	1600	nil
	Actual Expenditure	3509836.38	80693.92	2680.57	1579.23	nil
2021-22	Budget Estimate	3483235.63	73931.77	6400	1900	4810
	Revised Estimates	376999.73	86000.65	3199	1675	9155.97
	Actual Expenditure		80693.92			
2022-23	Budget Estimate	3944908.67	86200.65	6412	nil	10465.09
	Revised Estimates					
	Actual Expenditure					

**All figures are in crores and in nominal terms

Source: Ministerial Budget

FY 2019-20

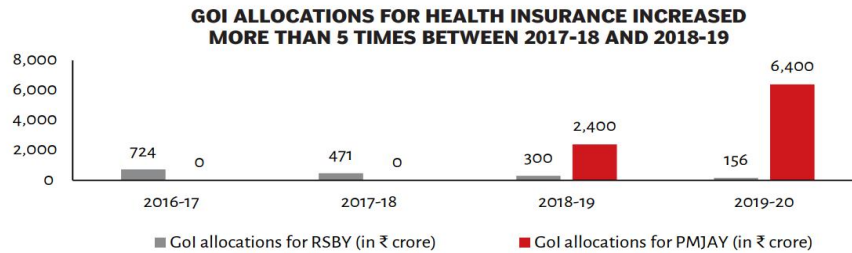
PMJAY

With the launch of PMJAY in FY 2018-19, allocations stood at `2,400 crores in the Revised Estimate (RE) and increased to `6,400 crores in FY 2019-20 Budget Estimates (BEs), the same as Interim Budget allocations.

Allocation

Allocations

- Since the launch of PMJAY, GoI allocations for health insurance have seen a significant increase. In FY 2017-18, allocations for RSBY stood at ₹471 crore. With the launch of PMJAY in FY 2018-19, allocations increased nearly five-fold and stood at ₹2,000 crore. This was further increased to ₹2,400 crore in the RE.
- In FY 2019-20 (BE), ₹6,400 crore was allocated to PMJAY, a 167 per cent increase from the revised allocations of FY 2018-19.

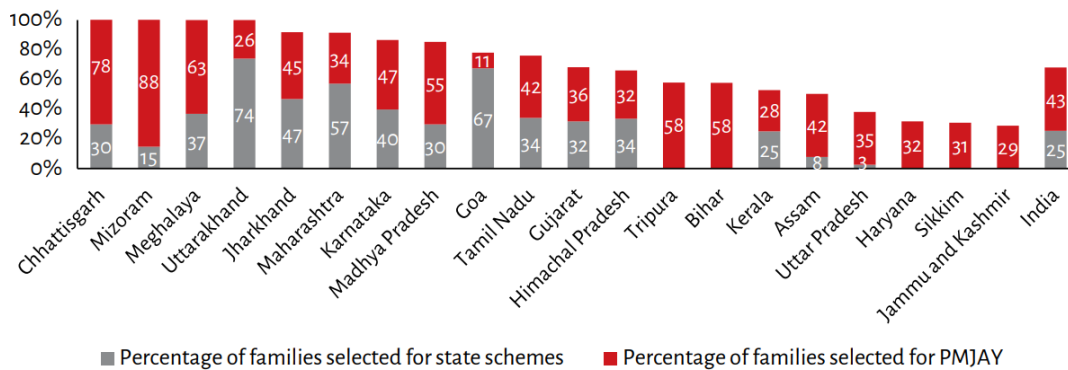


Source: Union Expenditure Budget, Volume 2, Ministry of Health and Family Welfare, FY 2015-16 to FY 2019-20 (BE). Available online at: <https://www.indiabudget.gov.in>. Last accessed on 5 July 2019.

Note: Figures are in crores of rupees and REs, except for except for FY 2019-20 which are BEs.

Coverage- A total of 10.74 crore families (approximately 50 crore beneficiaries) were selected to be covered under the scheme. Of the 26 states for which data was available, till 14 June 2018, a total of 11.97 crore households had been covered under either PMJAY or state health insurance schemes. This accounts for 68 percent of the total families in the state as per Census 2011. Of the total families covered under any public health insurance scheme, PMJAY accounted for the majority at 63 percent.

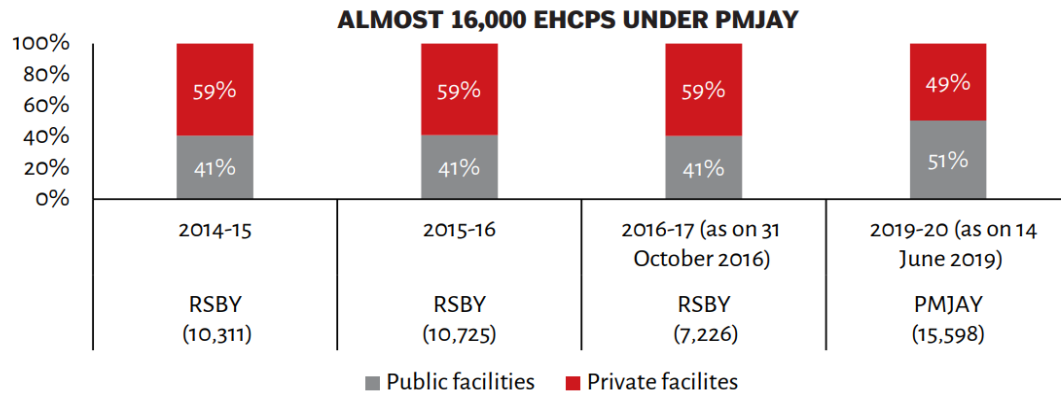
ACROSS INDIA, 68% HOUSEHOLDS ARE COVERED UNDER PMJAY AND STATE SCHEMES



Source: PMJAY state portal. Available online at: <https://www.pmjay.gov.in/state>. Last accessed on 28 June 2019.

Note: (1) Data for Andaman and Nicobar Islands, Andhra Pradesh, Lakshadweep, Puducherry, Punjab, and Rajasthan was unavailable. (2) For Chhattisgarh and Mizoram, 8 per cent and 3 per cent of families were covered under both state schemes and PMJAY, respectively.

Service provision- PMJAY benefits include 1,350 medical packages covering surgery, medical and daycare treatments, the cost of medicines, and diagnostics. The expansion of PMJAY to cover 32 states and UTs has resulted in a significant increase in the number of EHCPs (Empaneled Health care Providers), particularly public hospitals under PMJAY. THERE WERE 5,111 ELIGIBLE FAMILIES PER EHCP UNDER PMJAY, AS OF 28 JUNE 2019.

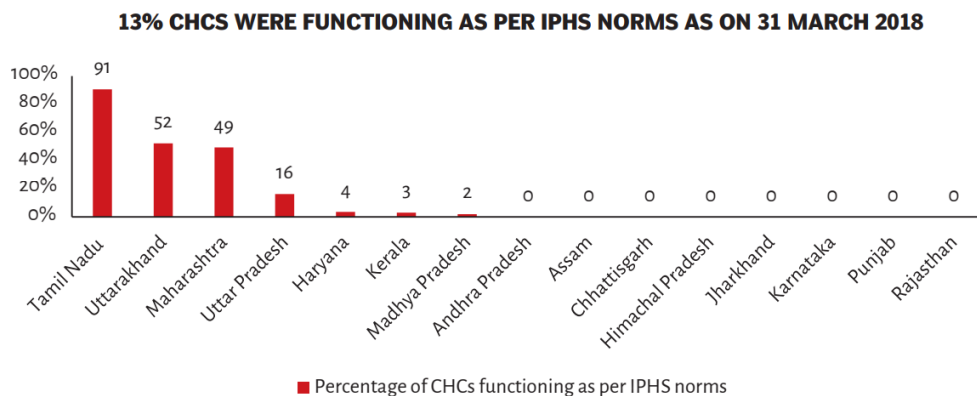


Source: PMJAY portal on empanelled hospitals. Available online at: <https://hospitals.pmjay.gov.in/Search/empnlWorkflow.htm?actionFlag=ViewRegisteredHospitlsNew>. Last accessed on 14 June 2019.

Claims and Reality-Beneficiaries can claim up to `5 lakh per year under PMJAY. However, THE AVERAGE CLAIM AMOUNT WAS `13,228 AS OF 18 JUNE 2019.

All CHCs are deemed empaneled under PMJAY. However, as on 31 March 2018, only 13 percent CHCs were functioning as per Indian Public Health Sector (IPHS) norms.

Vacancies for key posts such as specialists and General Duty Medical Officers (GDMOs) were high. As of March 2018, nearly 15 percent of sanctioned posts for GDMOs and 74 percent for specialists (surgeons, physicians, and pediatricians) were vacant.



Source: Rural Health Statistics 2018. Available online at <https://nrhm-mis.nic.in/Pages/RHS2018.aspx?RootFolder=%2FRURAL%20HEALTH%20STATISTICS%2F%28A%29%20RHS%20-%202018&FolderCTID=0x01200057278FD1EC909F429B03E86C7A7C3F31&View=%7B09DDD7F4-80D0-42E3-8969-2307C0D97DDB%7D>. Last accessed on 14 June 2019.

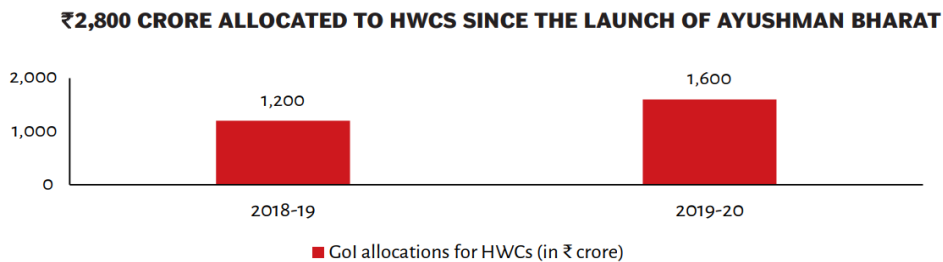
HWCs

In FY 2019-20 (BE), GoI allocations for HWCs increased by 33 percent to ₹1,600 crores, up from ₹1,200 crores in FY 2018-19.

Allocation

Allocations

- In FY 2018-19, ₹1,200 crore was allocated for HWCs. This increased by 33 per cent to ₹1,600 crore in FY 2019-20 (BE).



Source: Union Expenditure Budget, Volume 2, Ministry of Health and Family Welfare, FY 2015-16 to FY 2019-20 (BE). Available online at: <https://www.indiabudget.gov.in>. Last accessed on 5 July 2019.

Note: Figures are in crores of rupees and REs, except for FY 2019-20 (IB) which are BEs.

14. **Coverage**-The number of HWCs to be rolled out in each year till 2022 is given below: -

- FY 2018-19: 15,000
- FY 2019-20: 25,000
- FY 2020-21: 30,000
- FY 2021-2022: 40,000
- From April to December 2022: 40,000.

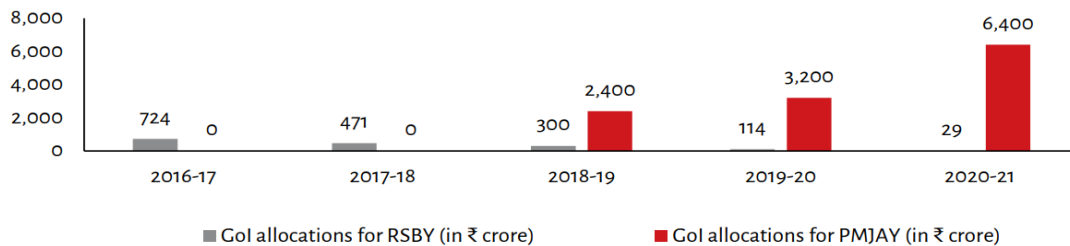
1,50,000 HWCs till 2022 (ESTIMATED)

FY 2020-21

PMJAY

1. Since the launch of PMJAY, GoI allocations for health insurance have seen a significant increase. In FY 2020-21, GoI allocated `6,400 crores to PMJAY, a two-fold increase compared to FY 2019-20 Revised Estimates (REs) but the same as the Budget Estimates (BEs).
2. **Allocations-** In FY 2020-21 Budget Estimates (BEs), `6,400 crores have been allocated for the scheme, same as the FY 2019- 20 BEs, but double the REs.
3. Allocations for RSBY, which PMJAY has subsumed, decreased from `114 crore to `29 crore between FY 2019-20 and FY 2020-21. The combined allocations for this insurance-based public healthcare scheme, PMJAY (including RSBY) therefore increased from `3,314 crores to `6,429 crores.

THE ALLOCATIONS FOR PMJAY DOUBLED BETWEEN 2019-20 AND 2020-21

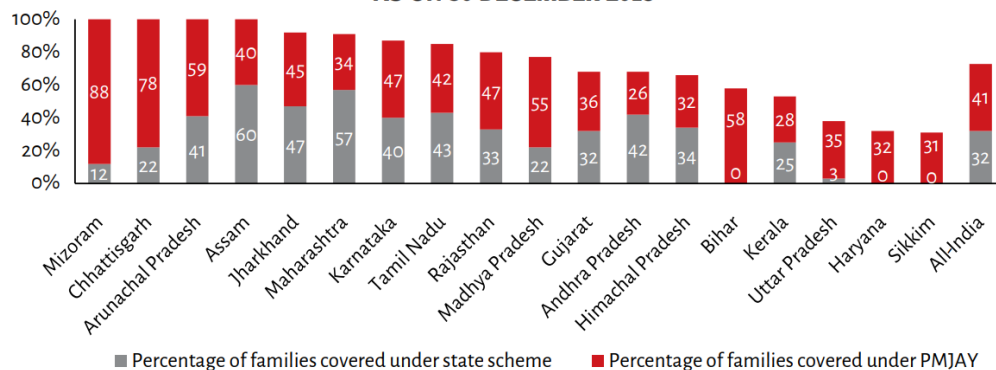


Source: Union Expenditure Budget, Volume 2, Ministry of Health and Family Welfare, FY 2015-16 to FY 2020-21. Available online at: <https://www.indiabudget.gov.in>. Last accessed on 1 February 2020.

Note: Figures are in Rupees crores and are Revised Estimates (REs), except for FY 2020-21 which are Budget Estimates (BEs).

Coverage-Till 30 December 2019, a total of 15.75 crore households had been covered under either PMJAY or state health insurance schemes. This accounts for 73 percent of the total families in these 32 states and UTs as per Census 2011, a 7.5% increase from the previous year. 11.75 crore beneficiaries under PMJAY received e-cards as identification under the scheme. (2 Jan 2020)

73% FAMILIES ACROSS INDIA WERE COVERED UNDER PMJAY AND STATE SCHEMES AS ON 30 DECEMBER 2019



Source: State factsheets from PMJAY website. Available online at: <https://www.pmjay.gov.in/node/810>. Last accessed on 30 December 2019.

Service provision- PMJAY benefits increased to 1,393 medical packages till 2 December 2019. Under PMJAY, till 25 November 2019, there were 19,668 EHCPs. Of these, 46 percent were privately run. ACROSS INDIA, 4,492 FAMILIES WERE ELIGIBLE FOR PMJAY PER EHCP AS OF 25 NOVEMBER 2019, a reduction from the eligibility as of 28 June 2019.

Claims and Reality- Release of funds was slow in FY 2019-20. By 29 November 2019, `1,014 crores or 32 percent of revised allocations for FY 2019-20 had been released.

HWCs

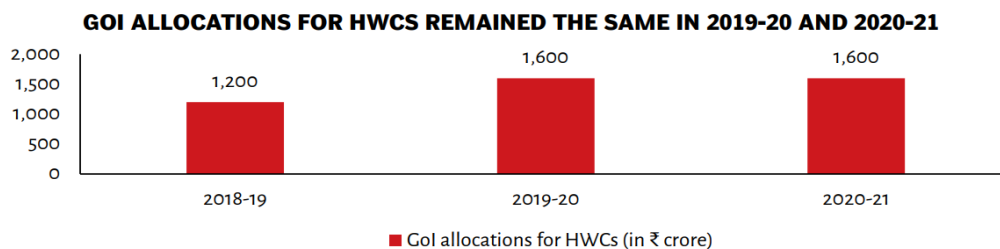
In FY 2020-21, GoI allocated `1,600 crores to HWCs, the same as the previous financial year. As on 30 December 2019, 27,020 HWCs were functioning, accounting for 66 percent of the cumulative target till 31 March 2020. OF FUNCTIONAL HWCs-

- 43% WERE SHCS (sub-health Centres)
- 47% WERE PHCS (primary health Centres)
- 10% WERE UPHCS (urban primary health Centres)

Allocation-

Allocations and Releases

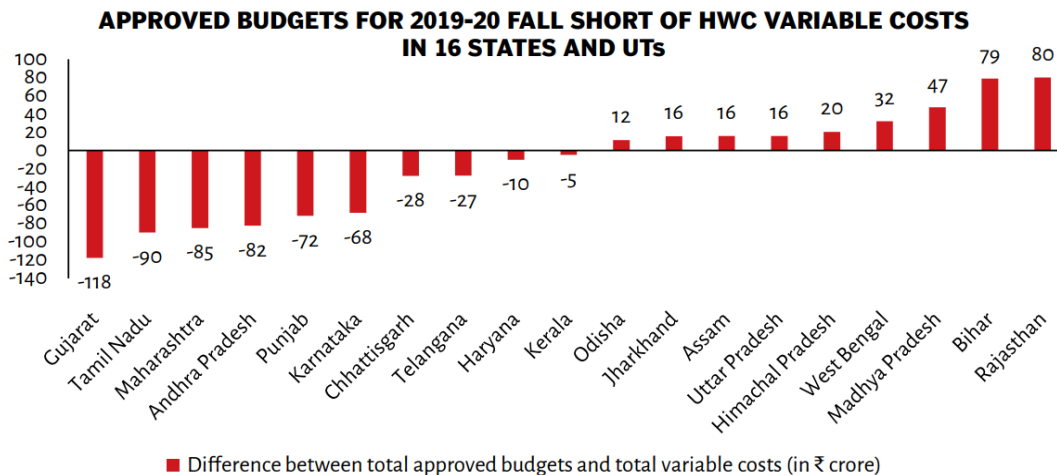
- In FY 2018-19, ₹1,200 crore was allocated for HWCs. Of that amount, ₹1,192 crore, or over 99 per cent was released. Allocations for HWCs increased by 33 per cent to ₹1,600 crore in FY 2019-20. In FY 2020-21 BE, the allocations stayed the same at ₹1,600 crore.



Source: Union Expenditure Budget, Volume 2, Ministry of Health and Family Welfare, FY 2015-16 to FY 2020-21. Available online at: <https://www.indiabudget.gov.in>. Last accessed on 1 February 2020.

Note: Figures are in Rupees crores and are Revised Estimates (REs), except for FY 2020-21 which are Budget Estimates (BEs).

COSTS: - Setting up HWCs requires both fixed and variable costs. Total costs required have been estimated using only the variable cost. The variable costs for HWCs functioning as on 30 December 2019, stood at `1,793 crores. This was `193 crore higher than the approved budgets for FY 2019-20.



Source: (1) Operational HWCs from AB-HWC website. Available online at: <https://ab-hwc.nhp.gov.in/>. Last accessed on 30 December 2019. (2) Unit costs from Operational Guidelines for Comprehensive Primary Health Care through Health and Wellness Centres. Available online at: <http://nhsrcindia.org/sites/default/files/Operational%20Guidelines%20For%20Comprehensive%20Primary%20Health%20Care%20through%20Health%20and%20Wellness%20Centers.pdf>. Last accessed on 30 December 2019. (3) Approved budgets for FY 2019-20 from Lok Sabha starred Question no. 170, answered on 29 November 2019. Available online at: <http://164.100.24.220/loksabhaquestions/answer/172/AS170.pdf>. Last accessed on 30 December 2019.

Budget Release- In FY 2019-20, till 30 September 2019, 70 percent of the GoI-approved budgets had been released. No funds were released to Delhi between 1 April 2018 to 30 September 2019.

Coverage- Till 30 December 2019, 27,020 HWCs were functional, which accounted for 66 percent of the cumulative target till 31 March 2020. Only 36 percent of the target SHCs had been operationalized. the target for PHCs and UPHCs had been exceeded with 174 percent of target PHCs, and 232 percent of target UPHCs operationalized.

FY 2021-22

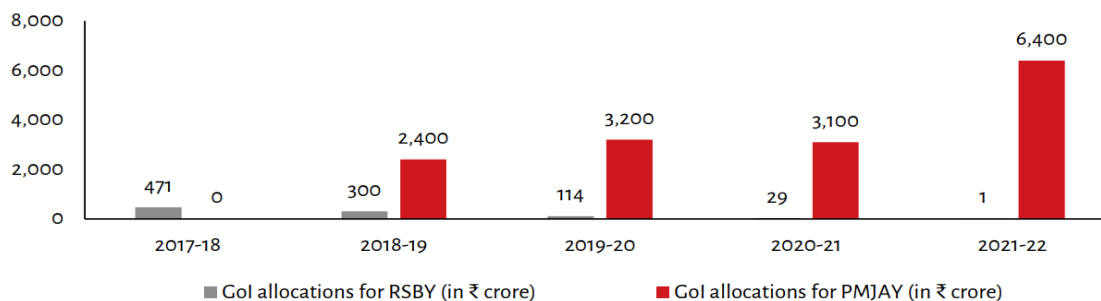
The COVID-19 pandemic has severely affected the public system. Consequently, the scheme's plans, targets, outputs, and outcomes were impacted in FY 2020-21.

PMJAY

The COVID-19 pandemic impacted PMJAY. Between 11-18 March 2020 and 25 March-1 April 2020, the number of **claims filed decreased by 64 percent**. On 4 April 2020, packages for treating and testing COVID-19 were added.

Allocations- For FY 2021-22 BEs, GoI allocated `6,400 crores to PMJAY, the same as FY 2020-21 BEs but more than double the REs. For FY 2020-21, till 20 November 2020, GoI had released only `1,032 crores, or 33 percent of the year's REs.

**₹6,400 CRORE ALLOCATED FOR 2021-22, SAME AS 2020-21 BES
BUT MORE THAN DOUBLE THE RES**



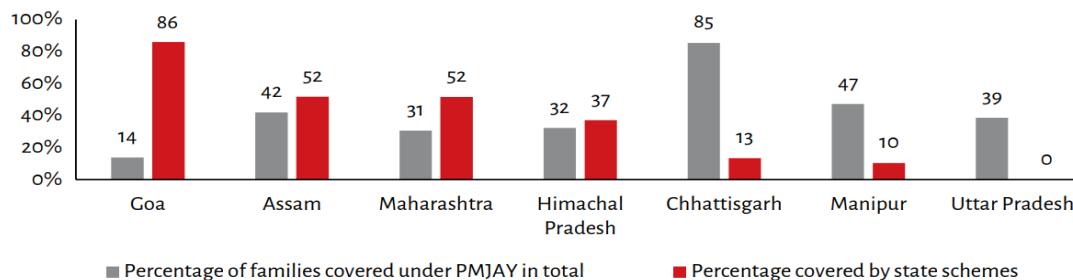
Source: Union Expenditure Budget, Volume 2, MoHFW, FY 2015-16 to FY 2021-22. Available online at: <https://www.indiabudget.gov.in>

Last accessed on 1 February 2021.

Note: Figures are in crores of Rupees and are Revised Estimates (REs), except for FY 2021-22 which are Budget Estimates (BEs).

Coverage- As on 15 July 2020, the total number of eligible families under PMJAY stood at 13.12 crore (22% increase). The revised number of eligible PMJAY families accounts for 58 % of the total number of families. The states denoted in the following graph, run both PMJAY and state schemes and have expanded the coverage of the scheme by adding a further 1.9 crore families, bringing the total insurance coverage to 66 percent of all families.

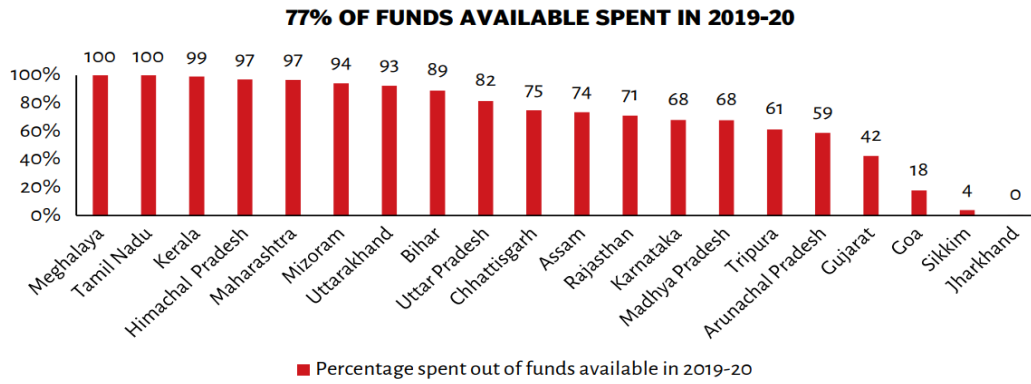
STATE SCHEMES HAVE HELPED AUGMENT PUBLIC INSURANCE COVERAGE



Source: State factsheets from PMJAY website. Available online at: <https://pmjay.gov.in/states/states-glance>. Last accessed on 18 December 2020.

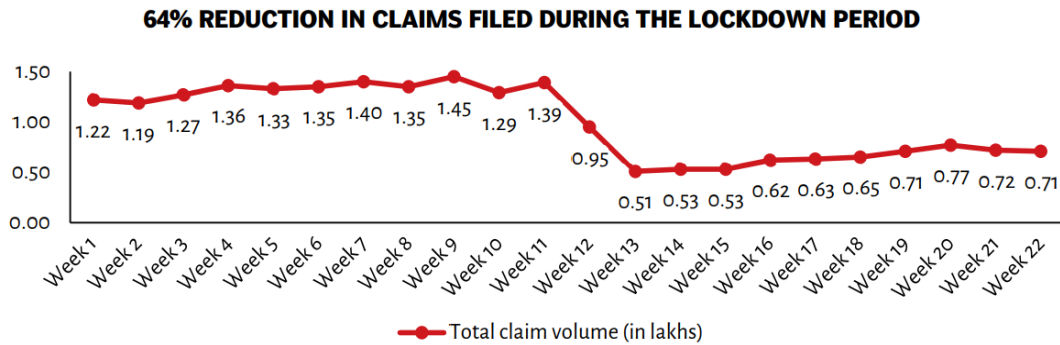
Service provision- Medical Packages have been the same as before (1393). On 4 April 2020, in light of the COVID-19 pandemic, the NHA added packages for testing and treating COVID-19 in both HBP (Health Benefit Package) 1.0 and HBP 2.0, covering the entire country. Till 14 September 2020, 12.55 crore e-cards had been issued. Under PMJAY, as on 24 November 2020, there were 24,457 EHCPs. Of these, 46 percent were privately run. As on 24 November 2020, there were on average 5,366 eligible families per EHCP.

Releases - Even prior to the pandemic, funds released by GoI were lower than REs. In FY 2018-19, GoI released 77 percent of the REs. In FY 2019-20, 94 percent of REs was released. The COVID-19 pandemic has resulted in a decrease in GoI releases across most schemes. As on 20 November 2020, GoI had only released ₹1,032 crores for FY 2020-21, which was 33 percent of the year's REs.



Source: RTI response by NHA dated 27 November 2020.

THE COVID-19 PANDEMIC AND PMJAY (Claims)- The COVID-19 pandemic and lockdown had an indirect impact on claims made under PMJAY. The number of claims filed fell by 64 percent from the week of 11-18 March 2020 and the week of 25 March-1 April 2020. Surgical cases declined more than medical cases.



Source: PMJAY policy brief 8, NHA. Available online at: https://pmjay.gov.in/sites/default/files/2020-06/Policy-Brief-8_PM-JAY-under-Lockdown-Evidence_12-06-20_NHA_WB.pdf. Last accessed on 22 December 2020.

HWCs

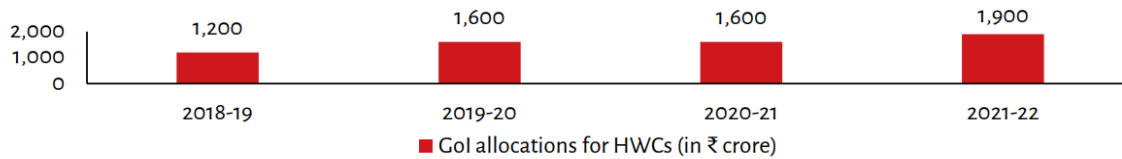
HWCs were not used in COVID-19 tasks, and the pandemic did not disrupt their operationalization. As on 20 November 2020, 50,069 HWCs were functional, accounting for 65 percent of the cumulative target for FY 2020-21.

- 56% SHCs
- 37% PHCs
- 7% UPHCs

Till 23 September 2020, HWCs were not utilized for undertaking COVID-19 tests. In FY 2021-22, a new Centrally Sponsored Scheme called the Pradhan Mantri Atmanirbhar Swasth Bharat Yojana will be launched with an allocation of `64,180 crores over six years.

Allocations- In FY 2018-19, `1,200 crores were allocated for HWCs but 99 percent was released. Allocations for HWCs increased by 33 percent in FY 2019-20 and stayed the same in FY 2020-21. In FY 2021-22 BEs, the allocations increased by 19 percent.

GOI ALLOCATIONS FOR HWCs INCREASED BY 19% BETWEEN 2020-21 REs AND 2021-22 BEs



Source: Union Expenditure Budget, Volume 2, MoHFW, FY 2015-16 to FY 2021-22. Available online at: <https://www.indiabudget.gov.in>. Last accessed on 1 February 2021.

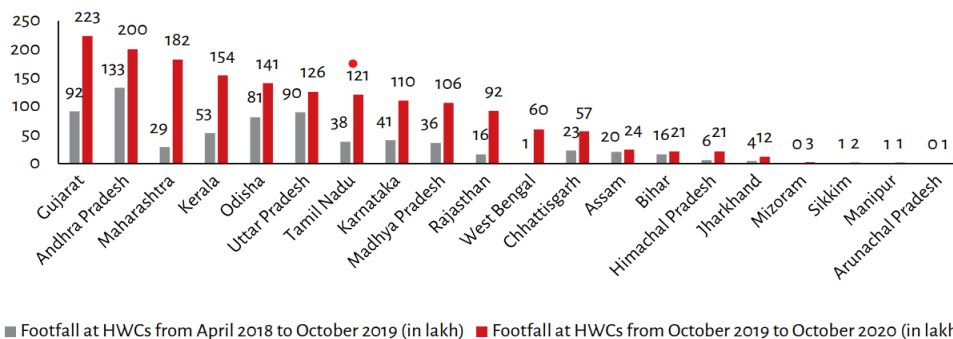
Note: Figures are in crores of Rupees and are Revised Estimates (REs), except for FY 2021-22 which are Budget Estimates (BEs).

Coverage- Between 30 December 2019 and 20 November 2020, 23,049 HWCs had been operationalized, bringing the total number of functional HWCs at 50,069. This accounts for 65 per cent of the cumulative target till FY 2020-21.

Human Resources. Only 75 per cent of Medical Officers required were in-position, indicating a vacancy rate of 25 per cent. Given the impact of the COVID-19 pandemic and increased role of these frontline workers, vacancies were likely to impact delivery of adequate health services.

Footfall- HWC footfall significantly increased from October 2019 to October 2020. Across India, as of October 2020, 2,672 lakh people visited HWCs, which was over three times the total footfall in 2020-21.

FOOTFALL FROM OCTOBER 2019 TO OCTOBER 2020 WAS MORE THAN TRIPLE THAN THAT FROM APRIL 2018 TO OCTOBER 2019



Source: Towards Universal Health Coverage. A Compendium of Health and Wellness Centres Operationalisation. Available online at: https://ab-hwc.nhp.gov.in/download/document/Towards_Universal_Health_Coverage_HWCO_14_12_20_for_web.pdf. Last accessed on 22 December 2020.

Latest Updates after the release of Union Budget 2022-23

The Budget Estimate 2022-23 has allocated Rs 86,606 crore to the health sector, which is a “negligible” increase as compared to the Revised Estimate of Rs 85,915 crore for FY 2021-22, say, health experts. According to Jan Swasthya Abhiyan, the share of health in the total budget has declined from 2.35 percent in budget 2021-22 to 2.26 percent in the current budget.

Updates from News 18 Report, August 1, 2022-Nearly four years after the scheme was launched, about 18.5 crore people have received their Ayushman Bharat e-cards. The Union Health Ministry has fixed a target to give Ayushman Bharat cards to 25 crore people by the end of FY 2022-23.

Nearly 3.65 crore hospital admissions worth over Rs 43,000 crore have been authorized under the Ayushman Bharat scheme so far with nearly 25,000 government and private hospitals empaneled under the scheme. PMJAY has so far covered 9,48,000 people with the state paying a total claim of Rs 3,713 crore since inception.

The Budget for Ayushman Bharat Digital Health Mission has been increased from Rs 30 crores allocated in the previous year to Rs 200 crores for 2022-23. Under Ayushman Bharat Digital Mission, every citizen is expected to get a digitally secured health identity card.

Specific to the Ministry of Health and Family Welfare- An open platform, for the National Digital Health Ecosystem, will be rolled out. It will consist of digital registries of health providers and health facilities, a unique health identity, a consent framework, and universal access to health facilities.

Conclusions and Future Prospects

After analyzing the extent to which both of these policies have been thrust by the government from the perspectives of various parameters, we would like to present some closing statements before finishing this small effort of ours. In line with the previous literature as already mentioned in our review, both of these policies in their fundamental terms are very much crucial for a developing nation like India, where unemployment is still a raging issue and accessibility of adequate health facilities and the required finances take a toll on people's psyche. The detrimental performance of any country in these two parameters portrays the need for much-required effort to be put forth in order to emerge as a "just" and "sustained" society in general. Since two of the policies are almost intertwined in some respect, the points to be made are presented as follows -

In the case of MGNREGA, the increment in the funds allocated portraying positive pictures on part of governmental effort really requires more stringent, strict, and qualitative supervision over the entire process of its implementation. As the real values showed, most of the funds allocated were not sufficient enough to cope with the rising prices. The trend analysis, despite showing an increase in the same on a year-by-year basis, is not significantly different from that of the previous year compared to real terms.

On the other hand, one of the most crucial aspects of the policy requires the work generated to be affable enough to generate more demand and thereafter imbibe the useful work culture required among the public. The amount of work demanded under the scheme being not very high doesn't help much in this case, though specific case studies of localities and states may provide us with a better & efficient model for the scheme's work generation agenda.

Further, as was the complaint with the previous UPA government regarding the underutilization of funds, during the NDA regime, though much differences were observed in the planned and actual estimates (with the latter being increased from the former in this case), it still remains a valid point of concern to look forward to and is to be dealt with due systematic checks and rechecks for any kind of leaks, corrupt practices.

There is no point in not calling out that the local political dynamics really plays a very important part in making these policies work where they were intended to. There have been instances of the work being done by the target-specific groups, but the funds allocated for wages were engulfed by the middlemen.

Coming to the points to be made in case of Ayushman Bharat, the welfare policy targeted towards making the idea of Universal Health Coverage for all a reality, keeping in the background the faltering lack of availability & access to health facilities in many parts of the country.

The trend analysis of the governmental effort provides us with a surge in the number of facilities (centers), no. of beneficiaries (through the issuance of e-card holders), as well as dilution of the funding from private to public sources. All of these points make the approach towards this policy by the current govt. more affable and directed towards making health coverage for all a reality for the public who couldn't afford a decent treatment previously. The year-by-year increment in funds allocated under this policy with specified targets in the new budget makes it a hefty task for the government to actually make the prospects realized in the coming years.

On a positive note, the structural dispersion of systematic procedures adopted in PMJAY (the health insurance wing of ABY), Increment in HWCs (to enhance the facilitative centers in the localities a reality) does indicate a positive trend in the funds in the few years since its inception. Also, reports suggest that coverage facilities garnered for the public ensured that no one was denied treatment demanded during the covid - 19 period, which is actually quite appreciable on its own. The general health infrastructure mission undertaken by the ministry (PMABHIM), has been allocated a sum of Rs. 10,000 crores per year if evenly distributed. But the point to be noted is that no such statements have been made about the initiation of the plausible disbursement of funds targeted to this.

Though trends are positive in the overall look and structure, there is one bit that requires to be fixed and that is the availability & presence of diversified specialists in the facilities. Data generated show a gradual increase in the no. of workers, staff and in cases specialists per year but the figures are not adequate enough to cope with the enormous demand for the same. It will be another hefty task for the government to fill up the vacancies.

In all, with humongous opportunities ahead in the case of an emerging power such as that of India, it is important that the fundamental indicators perform well and continue to be strengthened to target growth towards a sustainably developed state. As per the study we came across many appreciative points regarding the way the schemes have been handled in their lifetime and also have made critiques of points whenever we found it necessary. In our conclusive statements, we shed light on issues that are to be strictly dealt with in order to subjugate the idea of making this country a more "just" state in the coming years. With this, we conclude our small effort to contribute to the vastly growing literature on the efficacies of government schemes targeted toward the welfare of the society.

Abbreviation Table

MoHFM	Ministry of Health and Family Welfare
MRD	Ministry of Rural Development
GoI	Government of India
UPA	United Progressive Alliance
NDA	National Democratic Alliance
AB	Ayushman Bharat
MGNREGA	Mahatma Gandhi National Rural Employment Guarantee Act
UHC	Universal Health Coverage

FY	Fiscal Year
RE	Revised Estimates
BE	Budget Estimates
PMJAY	Pradhan Mantri Jan Arogya Yojana
HWC	Health and Wellness Centres
RSBY	Rashtriya Swasthya Bima Yojana
HSC	Health sub-centers
PHC	Primary Health Centres
CHC	Community Health Centres
SHC	Sub Health Centres
UPHC	Urban Primary Health Centres
EHCP	Empaneled Health Care Providers
IPHS	Indian Public Health Sector
GDMO	General Duty Medical Officers
NHA	National Health Authority
HBP	Health Benefit Package
CPR	Centre for Policy Research

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